

WISCONSIN EPI EXPRESS

June 21, 2004

[Wisconsin Department of Health & Family Services](#)
Division of Public Health
Bureau of Communicable Diseases and
Preparedness

"Surveillance provides information for action." [World Health Organization](#)

The WISCONSIN EPI EXPRESS provides a regular update on communicable disease issues of importance in our state and is intended primarily for participants in the public health surveillance system. Please let us know if the topics covered are on target or if there are others that we should be addressing. Thank you. Herb Bostrom: bostrhh@dhfs.state.wi.us

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1. NATIONAL HIV TESTING DAY: JUNE 27, 2004

June 27 is National HIV Testing Day. The CDC estimates that between 850,000 and 950,000 are living with HIV and yet nearly 180,000 to 280,000 individuals are unaware of their HIV infection. In Wisconsin, 8,000 persons are estimated to be living with HIV infection and approximately 2,000 are estimated to be unaware of their infection. National Testing Day is sponsored by the National Association of People with AIDS and helps reach millions of Americans with the message that "It's Better to Know" one's HIV status when one is at risk.

The National HIV Testing Day Resource website includes materials for downloading or ordering, such as a media kit, television and radio public service announcements, fact sheets and more. This web-based information resource is located on the Internet at:
<http://www.hivtest.org/subindex.cfm?FuseAction=Spotlight> .

One of the best resources for information and referral for Wisconsin consumers is the **Wisconsin HIV/STD/Hepatitis C Information and Referral Center (IRC)**. The IRC provides a wide range of health information and referral resources related to HIV, sexually transmitted diseases, and hepatitis C. The IRC has a toll-free number at 800-334-2437 (in Milwaukee, 414-273-2437) and a website at <http://irc-wisconsin.org> which lists, among other resources, locations of Wisconsin HIV counseling and testing sites.

The **Wisconsin AIDS/HIV Program** website contains a wide variety of information resources including fact sheets, statistics and reports, links to related websites, and samples of materials from the "**Live. And let live.**" media campaign. "**Live. And let live.**" campaign materials are directed at promoting HIV testing among African American and Hispanic communities in Wisconsin. To view these and other materials, visit the Wisconsin AIDS/HIV Program website at <http://dhfs.wisconsin.gov/aids-hiv> .

2. STD COMMUNICATIONS DATABASE AVAILABLE ONLINE

The Centers for Disease Control and Prevention (CDC), through the CDC Division of STD Prevention, has supported the development of a STD Communications Database which provides easy access to:

- references to evidence-based communications efforts;
- peer-reviewed journal articles;
- lessons learned from other STD campaigns;
- audience profiles, including preferred communications sources and channels;
- theoretical approaches applicable to STD prevention; and
- decision support tools to help users identify STD communications needs.

The Database provides information regarding specific target audiences in relation to certain STD communication and information needs, and it serves as a useful tool for public health professionals by identifying and drawing on lessons learned from previous audience research and evaluation of communication intervention efforts.

The Database contains disease-specific communication information regarding select sexually transmitted diseases. Characteristics, knowledge, attitudes, behaviors, and beliefs of various target audiences are described. Target audiences include at-risk populations, health care practitioners, legislators and policymakers, community leaders, and the general public. The Database also contains extensive information regarding theoretical approaches from health communication, behavior change, and social marketing that can be applied to STD prevention and education; best practices and lessons from previous campaigns and communication efforts; and effective messages and channels for dissemination.

Further information on the STD Communications Database can be accessed through the Database website at <http://stdsearch.shs.net>.

3. WISCONSIN RECEIVES NATIONAL RECOGNITION FOR TUBERCULOSIS LABORATORY ACTIVITIES

During the recent 2004 National Tuberculosis Controllers Workshop in Atlanta, the Association of Public Health Laboratories Task Force on the Future of TB Laboratory Services presented their recommendations. Wisconsin's Mycobacteriology Laboratory Network (WMLN) was presented as one of the successful models for network collaboration.

The WMLN is sponsored by the Wisconsin State Laboratory of Hygiene (WSLH) and the Tuberculosis Program. It is an effective conduit between clinical laboratories and the public health system, providing regular reports on case counts, outbreaks, and resistance trends. Some services, such as nucleic acid amplification testing (MTD), TB identification, drug susceptibility testing, and molecular subtyping are centralized at the WSLH. WSLH staff provide technical training to clinical laboratories, as well as a repository for all TB isolates.

The process of developing the network began with a survey of laboratorians, clinicians and public health professionals to evaluate the role in TB prevention and control of all laboratories within the state. In 1998, a white paper was developed to describe current practices and provide recommendations to achieve consistent, high quality testing in all laboratories that perform TB testing. Beginning in 1999, network members promoted compliance with these recommendations through a series of site visits by WSLH staff and annual meetings with laboratory representatives from across the state.

The Task Force recommendations on the future of TB laboratory services may be obtained at URL <https://www.aphl.org/docs/TBTaskForceFINAL.pdf>

For more information about the Wisconsin Mycobacteriology Network, contact Phil Wand WMLN coordinator at (608) 263-5364 or e-mail wand@mail.slh.wisc.edu

4. SHIGELLA OUTBREAK IN MILWAUKEE, WI 06/14/04

The City of Milwaukee Health Department (MHD) with assistance from Division of Public Health, Communicable Disease Epidemiology Section (CDES), is investigating an ongoing *Shigella* outbreak potentially involving multiple child care centers in Milwaukee, WI. This is a separate cluster from the Madison *Shigella* outbreak described in the WEE on 05/28/04. Twenty-two ill individuals with onset dates ranging 5/01/04 to 6/11/04 have been confirmed as *Shigella sonnei*. Cases range in age from 1 to 45 years old (median = 11). Epidemiologic investigation appears to indicate person-to-person via the fecal/oral route, with additional follow-up being conducted by MHD to determine if there is any link between the different facilities. Susceptibility test results for the isolates demonstrated resistance to Ampicillin and Cephalothin. In addition, one patient's strain was resistant to Naladixic Acid and another was resistant to Amoxicillin/Clavulanic Acid.

In 2002 and 2003, there were 192 and 133 reported cases of shigellosis in Wisconsin, respectively. *Shigella* bacteria can cause infection in any age group but is recognized more often in young children. Symptoms of *Shigella* infection include abdominal cramps, fever and mild or severe diarrhea and may appear from 1 to 7 days after exposure but usually develop in 1 to 3 days. Some infected people may not show any symptoms. The bacterium is spread by eating or drinking contaminated food or water or by direct or indirect contact with fecal material from an infected person.

Most people with shigellosis infection will recover on their own in 2 to 3 days. Antibiotics are occasionally used to treat severe cases or to shorten the carrier phase, this is especially important in food workers, health care workers, children in schools or day cares, and institutionalized individuals. People with active diarrhea or those who are unable to control their bowel habits should be isolated. Most infected people may return to work or school when their diarrhea ceases, provided that they carefully washed their hands after each toilet visits. Hand washing with soap and water is the most important preventive method to control the spread of infection, especially during an outbreak. Food workers, children or staff in day care, and health care workers must obtain the approval of the local health department before returning to their routine activities. For appropriate length of exclusion from work or school please contact the local or state health department.

For more information contact Diep (Zip) Hoang Johnson, Epidemiologist Bureau of Communicable Diseases, Epidemiology Section, Division of Public Health (608) 267-7422 E-mail: hoangdk@dhfs.state.wi.us

5. FOCUS ON FIELD EPIDEMIOLOGY, IS USEFUL INTERNET SITE

The North Carolina Center for Public Health Preparedness in the UNC School of Public Health at Chapel Hill publishes a web-based periodical titled "***FOCUS on Field Epidemiology***", described as "a hands-on, practical approach to various topics in field epidemiology". Each issue of **FOCUS** has a corresponding downloadable PowerPoint® presentation. Included in the periodical is a topic overview with examples, helpful illustrations, a glossary, additional

resources, and discussion questions for individuals or groups. Solutions for the questions are posted on the **FOCUS** website. In addition, online self-evaluation questions complement each issue. **FOCUS** is available on the Web at <http://www.sph.unc.edu/nccphp/focus/> . There are currently four issues available online, w. more planned:

- Issue #1: Overview of Outbreak Investigations
- Issue #2: Anatomy and Physiology of an Outbreak Team
- Issue #3: Embarking on an Outbreak Investigation
- Issue #4: Case Finding and Line Listing: A Guide for Investigators

The publication is billed as having multiple uses, e.g., for computer-based self-study; as a face-to-face teaching tool for trainers; or to add to lunch and learn seminars or in-service trainings. Participants who complete these or other NCCPHP-developed training products can earn a free personalized, printable certificate of completion. Anyone visiting the **FOCUS** website should also click on “Home” on the upper left of the screen, to go to The North Carolina Center for Public Health Preparedness website for a variety of other information and resources, including a number of other online courses.

For more information, contact NC Center for Public Health Preparedness: Phone 919-843-5561 | Fax 919-843-5563 | email nccphp@unc.edu .

6. EIS OFFICER MARK SOTIR COMPLETES TRAINING WITH BCD

Dr. Mark Sotir, our CDC-assigned EIS (Epidemic Intelligence Service) Officer for the past two years, will be finishing his training with us at the end of June. Mark’s plan for the coming months is to first take a well-deserved break and travel to Europe and China. After that, he may return to BCD to tie up some loose ends from various projects he has worked on over the past two years. He also is interested in joining a Stop Transmission of Polio (STOP) Team to assist with the global efforts to eradicate polio.

Mark came to BCD in August 2002 after finishing a PhD in epidemiology at the University of North Carolina School of Public Health. His dissertation work involved examining the relationship between head colds and pediatric asthma. Prior to obtaining his PhD, Mark obtained an MPH at the Emory School of Public Health and worked three years for the Emory School of Medicine Division of Infectious Diseases, concentrating on TB and nosocomial disease surveillance.

Mark has been involved in a number of projects during his time in Wisconsin. He is probably best known to all of you for his work on the monkeypox outbreak last summer. However, he was also involved with investigations of giant African snails, West Nile virus in turkey breeder farm workers, simultaneous multi-county *E. coli* outbreaks, a hepatitis A outbreak in Brown County, an outbreak of norovirus at an Oneida County School, pertussis, and various other outbreak investigations too numerous to list. In addition, he has evaluated surveillance data for *Haemophilus influenzae* and meningococcal meningitis, and crunched any other numbers we happened to throw his way.

Mark even found time to step outside of BCD for a bit to collaborate with the Department of Emergency Medicine at the Medical College of Wisconsin. During this project, he used data collected as part of the Violent Injury Reporting System (VIRS) to conduct a comparison of characteristics between firearm and non-firearm suicide victims who committed suicide in Wisconsin during 2001.

His versatility, statistical skills and ability to create detailed schematics in Microsoft Excel will be greatly missed. All of us in BCD wish Mark the best of luck in all his future endeavors. Bon Voyage, Dude!!!

Telephone Reporting of Unusual Disease Occurrences

Occurrences of diseases that are uncommon or atypical in Wisconsin, and outbreaks or clusters of disease which are identified, should be reported by phone as soon as possible, to (608) 258-0099. Reports may be made to this number on a 24/7 basis, but please do not use it for normal and routine disease reporting

To be added to or removed from the distribution list contact:

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